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Bib Data Sheet

CONFIRMATION NO. 1072

SERIAL NUMBER 10/760,561	FILING DATE 01/20/2004  RULE	CLASS 210	GROUP ART UNIT 1724	ATTORNEY DOCKET NO. 03285						
<b>APPLICANTS</b>  Kazimierz Swistun, Buffalo Grove, IL; <div style="text-align: center;"></div>										
<b>** CONTINUING DATA *****</b>										
<b>** FOREIGN APPLICATIONS *****</b>										
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b> <b>** 04/29/2004</b>										
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; border-bottom: 1px solid black;">           Foreign Priority claimed            35 USC 119 (a-d) conditions met            Verified and Acknowledged         </td> <td style="width: 20%; border-bottom: 1px solid black;"> <input type="checkbox"/> yes <input checked="" type="checkbox"/> no  <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance            Examiner's Signature  </td> <td style="width: 10%; border-bottom: 1px solid black; text-align: center;">           STATE OR COUNTRY IL         </td> <td style="width: 10%; border-bottom: 1px solid black; text-align: center;">           SHEETS DRAWING 5         </td> <td style="width: 10%; border-bottom: 1px solid black; text-align: center;">           TOTAL CLAIMS 24         </td> <td style="width: 10%; border-bottom: 1px solid black; text-align: center;">           INDEPENDENT CLAIMS 4         </td> </tr> </table>					Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature	STATE OR COUNTRY IL	SHEETS DRAWING 5	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 4
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<b>ADDRESS</b> 30114 MERONI + MERONI P.O. BOX 309 BARRINGTON , IL 60011										
<b>TITLE</b> Gutter screen termination trim with water tension breaker										
FILING FEE  RECEIVED 914	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> All Fees</td> </tr> <tr> <td><input type="checkbox"/> 1.16 Fees ( Filing )</td> </tr> <tr> <td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td> </tr> <tr> <td><input type="checkbox"/> 1.18 Fees ( Issue )</td> </tr> <tr> <td><input type="checkbox"/> Other _____</td> </tr> </table>		<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees ( Filing )	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	<input type="checkbox"/> 1.18 Fees ( Issue )	<input type="checkbox"/> Other _____	
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